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26630

APPLICATION NO.

7590

09/29/2004

LOYD W BONNEVILLE 1213 AMSTERDAM AVE MADISON, WI 53716

10/13/2004 GWORDOF2 00000092 10696915

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Marilyn J. Bonneville Depositor's name) maril (Date

ATTORNEY DOCKET NO.

| APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$665 S0 \$665 12/29/2004 EXAMINER ART UNIT CLASS-SUBCLASS RICHMAN, GLENN E 3764 482-139000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. The Address indication for "Fee Address" Indication form PTO/SB/122) attached. RICHMAN, GLENN E 3764 482-139000 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents of a gents OR, alternatively. (2) the name of a single firm (having as a member a registered patent attorney or agents of up to 2 registered patent attorneys or agents of up to 2 registered patent attorneys or agents. If no name is slisted, no name will be printed on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to the patent of the required fee(s), or credit any overpayment, to the patent of the required fee(s), or credit any overpayment, to the patent of the required fee(s), or credit any overpayment, to the patent of the required fee(s), or credit any overpayment, to the patent of the required fee(s), or credit any overpayment, to the patent attorneys are a member a registered patent attorneys or agents. If no name is slightly in the patent attorneys or agents. If no name is a registered patent attorneys or agents. If no name is a registered patent attorneys or agents. If no name is a registered patent att | 10/696,915 | 10/29/2003 | Robert Sylvester | | ı | 8218 | |
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| 2. For printing on the patent front page, list CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Fee Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Attorney Loyd W. Bonnevill (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents) and the names of up to 2 registered attorney or agents of up to 2 registered attorneys or agents. If no name is listed, no name will be printed. Be a considered attorney or agents attorney or agents of up to 2 registered attorneys or agents. If no name is listed, no name will be printed. Corporation or other private group entity or other patents of up to 2 registered attorneys or agents of up to 2 registered attorneys or agents of up to 2 registered attorneys or agents of up | EXAMINER . | | ART UNIT | | CLASS-SUBCLASS |] . | |
| CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Above range for up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. (C) the names of up to 3 registered patent attorneys or agents on a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Above range for up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. (C) the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. (D) Payment of type) Attorney (D) the name of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. (D) the name of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. (D) the name of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. (D) the name of up to 2 the name of up to 2 pregistered attorneys or agents. If no name is listed, no name will be printed. (D) the name of up to 2 the name of up to 2 pregistered attorneys or agents. If no nam | RICHMAN, GLENN E | | | | 482-139000 | | |
| Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Publication Fee (No small entitle discourse permitted) Payment by credit card. Form PTO-2038 is attached. | CFR 1.363). Change of correspon Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI | dence address (or Change of 22) attached. ation (or "Fee Address" Indic or more recent) attached. Us | Correspondence ation form e of a Customer BE PRINTED ON T | (1) the na or agents (2) the na registered 2 registered listed, no | mes of up to 3 registered pate OR, alternatively, me of a single firm (having as attorney or agent) and the nated patent attorneys or agents. I name will be printed. [(print or type) | a member a nes of up to f no name is 3 | ttorney |
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| Deposit Account Number (enclose an extra copy of this form). | 4a. The following fee(s) are Issue Fee Re Publication Fee (No | enclosed: turn Receipt Pos small entities is separate paraniti | 4b tcard ed) | Payment of A check Payment The Dir | Fee(s): in the amount of the fee(s) is e by credit card. Form PTO-203 ector is hereby authorized by | nclosed. 8 is attached. charge the required fee(s), o | or credit any overpayment, to |

Loyd W. Bonneville Typed or printed name Registration No. This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (it required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trade mark Office.

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Authorized Signature

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

Oct 5 04

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).